Headquarters U.S. Air Force

Integrity - Service - Excellence

AFMS Group

16 Aug 04
1400-1530

U.S. AIR FORCE

AFMS Group Agenda

- **FY04 UFRs – Col Hanson**
- **Open Discussion**

Headquarters U.S. Air Force

Integrity - Service - Excellence

FY04 UFRs

Col Hanson
HQ USAF/SGSR

U.S. AIR FORCE

Headquarters U.S. Air Force

Integrity - Service - Excellence

Aerospace Operations Panel
FY04 UFRs:
Candidates for EOY Fallout

16 Aug 04

U.S. AIR FORCE

SGPR/Radioactive Material Management Info System (RAMMIS) Database Upgrade

BACKGROUND:

RAMMIS database is server-based, Access based software used to store current/historical information regarding AF's use of Nuclear Regulatory Commission (NRC) regulated radioactive materials. Multiple Access software errors occurred due to software inability to store large data sets; AFPCA was able to fix the most pressing errors but many operating glitches remain. Persistent errors resulted in lengthy RAMMIS down-time which almost jeopardized our annual NRC inspection, still unable to run standard reports & generate required metrics.

ADJUSTMENT:

$200K for RAMMIS upgrade to Oracle and web-based version

$K:	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
CURRENT PRG	30	30	30	35	35	40	40	45
ADJUSTMENT	200							
REV PGM	230	30	30	35	35	40	40	45
TOTAL								

PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11

MPWR	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
OF								
EN								
L								
CIV								
K								
R								

IMPACTS:

IPL: N/A MAPPG: N/A BSC Objective: N/A

-REQUIREMENT:

RAMMIS, a legacy database used to manage 400 current permits, execute queries/generate reports, store federally mandated historical information for 800+ terminated/inactive permits. Properly operating RAMMIS key to preventing NOV issuance. Server is 5-yrs old; near end of useful life. Proposal to convert RAMMIS to web-based Oracle; will allow real-time base-level organization access, thereby eliminating need for HQ staff to process redundant requests. Current $30K will be used to set requirements for conversion; actual software conversion by AFMSA/SGSID expected at $200K

Maj Craig Refosco/SGPR/DSN 297-4309

Date: 8/9/04

Deployment Health Program

Lt Col Dennis Fay,

AFMSA, DSN: 297-4330

Initiative/Capability Gap

Gap #1: Current systems employed by AFMS do not capture an electronic DD Form 2796, Post Deployment Health Assessment form during in theater redeployment processes for transmittal to the Army Medical Surveillance Activity (AMSA)

Gap #2: Public Law, Department of Defense and Air Force policies require that in theater medical encounters must be captured in permanent medical records. Current policy to print all deployment records from Global Expeditionary Medical System (GEMS) and provide hard copies for return to home medical records does not result in consistent execution.

Gap #3: No data interface between the Air Force Personnel Data System (MILPDS/PERSCO) and deployment medical tracking systems (GEMS/PIMR) to ensure that all deployers are tracked IAW Presidential Directive 5, which established a requirement for longitudinal assessment of service member's health throughout their entire service history.

Gap #4: No consistent program exists to ensure Occupational, Environmental Health Surveillance Reports (OEHS) documented in permanent medical record.

Key Performance Parameters

- **Every deployer will be identified by Personnel to the medical system before he/she deploys, once he/she arrives in theater, when he/she redeploys and when he/she returns to home station.**
- **Each DD Form 2796 completed in theater will be electronically captured and transmitted to AMSA.**
- **In theater medical encounters, the signed DD Form 2796 and OEHS reports will be filed in each permanent medical record for every deployer.**
- **Centralized data and reports will be available for commanders at all levels to analyze the deployment health surveillance program for compliance with legal, DoD/AF policies.**
- **These documents will be available for all healthcare personnel so that they may evaluate deployment health data on each airman at every medical encounter.**

Desired Capability (new or improved) and Concept of Operations

- **All DD Forms 2796 Post Deployment Health Assessments will be captured electronically during in theater out-processing and transmitted to the Army Medical Surveillance Activity for archiving. Signed hard copies will also be filed in each deployers permanent medical record.**
- **Medical personnel will have personnel system data on all deployers in medical deployment data systems so that each deployer receives appropriate healthcare at the proper time in the deployment cycle.**
- **OEHS reports will be standardized and filed in the outpatient medical record**

Potential Solution and Alternative Solutions

- **Complete via AFCITA (approx $300K)**
- **Hand held MPDA(Bearing Pointe) solution currently employed by US Army in CENTCOM theater of operations. (approx $1.5M)**
- **Expand capabilities of the Global Expeditionary Medical System (GEMS) to include the electronic capture and transmission of existing in theater documents and the electronic DD Form 2796 (approx $700K).**

Medical Group Commanders Orientation to Aerospace Medicine Course

USAFSAM/ATO FAC 5912

BACKGROUND:

AF/SG identified critical need to familiarize MDG/CCs with the non-MTF aspects of aerospace & operational medicine, informing them of the mission mandates specific to AM at their MTF, to establish accurate expectations of their own AM program so as to facilitate their accomplishment of those mission mandates

ADJUSTMENT:

Funds are to cover travel, supplies, and reproduction costs. Will require additional 0.5 FTE (officer) to develop, schedule, manage the course.

$M:

	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
CURRENT PRG	0	29K	58K	58K	58K	58K	58K	58K
ADJUSTMENT	29K	29K	0	0	0	0	0	0
REV PGM	29K	58K	58K	58K	58K	58K	58K	58K
TOTAL								

PROCUREMENT	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10
N/A	0	0	0	0	0	0	0	0

MPWR	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10
OFF	0	0	1	1	1	1	1	1
ENL	0	0	0	0	0	0	0	0
CIV	0	0	0	0	0	0	0	0

IMPACTS:

- REQUIREMENT: Requested by AF/SG
- Impact if not funded: Continuation of perceived lack of non-Team Aerospace MDG/CC's understanding of aerospace and operational medicine affecting the appropriate necessary support of USAF operational mission; increased understanding may also enhance relationships between Line leadership and AFMS
- Course to be held at USAFSAM, 2 times/yr, 10 training days each, max class size 15
- Addition of 1 FTE requested to conduct course as well as offset manpower needed to put on other SG requested courses which came with no additional manpower (Aerospace Medicine in Space Ops, Chief, Aeromedical Services & Flight Surg Symp, Advanced Clinical Concepts in AE, USUHS AM orientation, TAOS for flight docs)

Col B Hadley Reed, USAFSAM/ATT, DSN 240-2844
Date: 2/25/2004

Aerospace Physiology Information Management System

BACKGROUND:

AFI 11-403, Aerospace Physiological Training Program, establishes physiological/human performance training requirements for Air Force personnel, DoD/contract civilians, and support personnel. Aerospace Physiology Information Management System (APIMS) schedules students, tracks data, and produces training reports.

ADJUSTMENT:

This outdated stand alone system provides limited analysis and is quickly exceeding its data storage capacity. Upgrade of this system will include an evaluation of the potential integration in another AFMS information system, aircrew training system, or web-based stand alone. Adds $200,000 migration and $50,000 sustainment.

FUNDING:	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
CURRENT PROGRAM	0.0	0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	200K	50K	50K	50K	50K	
REVISED PGM TOTAL	50K 200K	50K 50K	50K		50K	

PROCUREMENT	FY02	FY03	FY04	FY05	FY06	FY07

MANPOWER	FY02	FY03	FY04	FY05	FY06	FY07
OFFICER	0	0	0	0	0	0
ENLISTED	0	0	0	0	0	0
CIVILIAN	0	0	0	0	0	0

IMPACTS:

MAPPG: No

Requirement: This initiative upgrades a critical data management system that has been maintained in house, as an additional duty of a physiology technician. An integrated system would insure maintenance and availability of training data at 50 training units. Integration into existing AFMS database will be reviewed. It would also allow for immediate access to the data for decision makers at MAJCOM and HQ AF.

Impact: Without adequate software for database management, aircrew training records could be lost resulting in grounding and/or necessary retraining. Better customer service for class availability and scheduling. Informative gathered by hand

FAC 5927G - Enterprise Environmental, Safety & Occupational Health (EESOH) Integration

BACKGROUND:

AF/SG directed Occupational Health Database program, directly tied to agreement with AF/ILE to jointly develop integrated ESOH System fielded under single sign-on AF-GCSS architecture. Migration to WEB through EESOH partnership formed with critical integration schedule. MOA between SG & CE established.

ADJUSTMENT:

Funds complete EESOH/Command Core (CCS) interface, migrate CCS IH to DoD Oracle web application (DOEHRS-IH) deploying under Global Combat Support System Architecture with interface to EESOH-MIS

$M:	FY04	FY05	FY06	FY07	FY08	FY09
CURRENT PRG	0.0	0.0	0.0	0.0	0.0	0.0
ADJUSTMENT	2.4	0.0	0.0	0.0	0.0	0.0
REV PGM TOTAL	2.4	0.0	0.0	0.0	0.0	0.0

PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09
N/A	0	0	0	0	0	0

MPWR	FY04	FY05	FY06	FY07	FY08	FY09
OFF	0	0	0	0	0	0
ENL	0	0	0	0	0	0
CIV	0	0	0	0	0	0
CONT						

IMPACTS:

IPL: Y/N MAPPG: Y/N

- REQUIREMENT AF/SG Command Core Policy, AFPD 90-8, SAF/IEE ESOH-MIS Strategy
- System sustainment, web migration, and enhancements fail, including interfaces to readiness systems.
- Unsupportable local database development, no program standardization, and lost medical data.
- WEB migration development ensures functioning HAMZAT licensing and health risk assessment function at all bases. Failure to migrate with CE community to ESOH system mean duplicative base operations.
- Ability to manage regulatory required OH and environmental compliance data in

Aerospace Medicine Division (AFMSA/SGPA)

BACKGROUND:

Web based applications that centralize waiver and exception to policy (ETP) decisions into data repository. Automates AF accession and flying waiver processing. Workflow management system that tracks flying waiver/ETP through entire lifecycle. Validates waiver/ETP decisions.

ADJUSTMENT:

1) Requirement for upgrades to web-based AIMWTS and PEPP program ($100K UFR in FY 03 and FY04)

$M	FY03	FY04	FY05	FY06	FY07	FY08	FY09	
Current Prg	0	0	0	0	0	0	0	
Adjustment		0	100	0	0	0	0	0
Rev Pgm Total	0	100	0	0	0	0	0	

PROCUREMENT	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10

MPWR	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY10

IMPACTS:

Minimize time to complete certification and waiver processing-expedites accession and cross-training

Provides searchable database for physical standards and waiver criteria to provide evidence based decisions for standards

Automated channel for USAF medical and para-professional personnel to communicate on status and flow of physicals

Bridge gap in physical standards experience created with 4F/4N merger by enhancing current programs with help files, color-coded examination requirements.

Replace obsolete Standard Forms with DoD forms currently used by sister services which will decrease errors, increase familiarity, and be accepted by other services

Mrs. Brenda Kearney SGPA, DSN 297-4200

Headquarters U.S. Air Force

Integrity - Service - Excellence

Medical Modernization Panel
FY04 UFRs:
Candidates for EOY Fallout

16 Aug 04

U.S. AIR FORCE

Prioritized UFR List for EOY Fallout

1.	CHCS II and PGUI Sustainment Training	$1.98M
2.	FY 04 AMC IM/IT Program	$877K
3.	FY 04 AETC IM/IT Program	$4.7M
4.	USAFE Flight of the Future	$1.76M
5.	Telephony Upgrade & Modernization (OP)	$5.6M

CHCS II & PGUI Sustainment Training

BACKGROUND:

The AFMS has an estimated 4,482 CHCS II & P-GUI users across 21 Air Force MTFs requiring sustainment training support from 1 Oct 04 - 30 Sep 05. Sustainment Training is a Service responsibility per CHCS II ORD v3.7, 19 Feb 04.

ADJUSTMENT:

Funding will buy 48,800 man-hrs supporting 21 Air Force MTFs. (Based on 1 trainer/250 users @ $120K/yr). The annual cost is $1.98 M. The MTF trainers will facilitate new accession training, provide new-functionality and refresher training; Will train Help Desk (Tier-0) systems personnel; Facilitate development of in-house super users to continue on-going training after FY05. New accession training by 882 TRG beginning FY06.

$M06A1I244AY

	FY04	FY05	FY06	FY07	FY08	FY09
CURRENT PRG	0.000	0.000	0.000	0.000	0.000	0.000
ADJUSTMENT	1.98	00.00	00.00	00.00	00.00	00.00
REV PGM TOTAL	1.98	00.00	00.00	00.00	00.00	00.00

PROCUREMENT	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11

MPWR	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
OFFEN	0	0	0	0	0	0	0	0
CIVIL	0	0	0	0	0	0	0	0
CTR	17	0	0	0	0	0	0	0

IMPACTS: IPL: N; MAPPG: N; SGROCC: N/A

- Train-the-trainer methodology ineffective at initial CHCS II & PGUI sites
- Current sustainment training method relies on over-tasked & unavailable MTF staff
- Reliance on in-house trainers (providers) impacts productivity and patient access to care
- Quality of training is not standardized & is inconsistent
- Expected additional CHCS II & PGUI releases will exacerbate this situation
- AFMS user acceptance of CHCS II & PGUI is in jeopardy

LTC Fuller/SGRT/DSN761-6144

Proposed AFMS Sustainment Training Plan

Site	MAJCOM	Total Users	#of trainers	Total Wk	Req'd hours	Cost	Cumulative Cost
Tinker	AFMC	**202**	1	**52**	2080	$120,000	$120,000
Goodfellow	AETC	**72**	1	**52**	2080	$120,000	$240,001
Seymour	ACC	**108**	1	**52**	2080	$120,000	$360,001
Langley	ACC	**292**	1	**52**	2080	$120,000	$480,002
Scott	AMC	**368**	2	**104**	8320	$240,001	$720,002
Fairchild	AMC	**109**	1	**52**	2080	$120,000	$840,003
Laughlin	AETC	**102**	1	**39**	1560	$90,000	$930,003
McChord	AMC	**118**	1	**40**	1600	$92,308	$1,022,311
Altus	AETC	**85**	1	**35**	1400	$80,770	$1,103,081
Brooks	AFMC	**53**	1	**33**	1320	$76,154	$1,179,235
Randolph	AETC	**201**	1	**28**	1120	$64,616	$1,243,850
Vandenberg	AFSPC	**108**	1	**27**	1080	$62,308	$1,306,158
Travis	AMC	**971**	4	**48**	7680	$110,770	$1,416,928
Sheppard	AETC	**323**	2	**56**	4480	$129,231	$1,546,159
Edwards	AFMC	**117**	1	**24**	960	$55,385	$1,601,544
Los Angeles	AFSPC	**103**	1	**23**	920	$53,077	$1,654,621
Eielson	PACAF	**112**	1	**23**	920	$53,077	$1,707,698
Elmendorf	PACAF	**459**	2	**26**	2080	$60,000	$1,767,698
Vance	AETC	**68**	1	**22**	880	$50,769	$1,818,468
Moody	AFSOC	**136**	1	**42**	1680	$96,923	$1,915,391
Ramstein/Sembach	USAFE	**375**	2	**30**	2400	$69,231	$1,984,622
TOTALS		**4482**		**860**	**48800**		

Tot Users	**4482**
Tot Weeks	**860**
Tot Hours	**48800**
Total Cost (Wkly Cost * # Weeks)	**$1,984,622**

Annual Cost/FTE = $120,000

Weekly Cost/FTE = $2,308

FY04 AMC IM/IT Program

BACKGROUND:

The program provides the maintenance and sustainment for connectivity, storage, and innovative tools for support clinical and business operations in the command. This includes end-to-end IT operations for data, video, and voice. There is an increasing demand and reliance on these operations coupled with IM/IT funding used as offsets for must pay bills. FY04 funding program covered a portion of the basic desktop/printing requirements.

ADJUSTMENT:

The adjustment is for $877K UFRs in FY04 in IT Commodities...extending beyond the basic desktop needs. No significant lead time needed for procurement.

FUNDING ($M):	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
CURRENT PROGRAM	2.347	5.390	5.470	5.552	5.636	5.720
ADJUSTMENT	0.877					
REVISED PGM TOTAL	3.215	0.0	0.0	0.0	0.0	

PROCUREMENT	FY03	FY04	FY05	FY06	FY07	FY08
Item 1						
Item 2						

If Applicable

MANPOWER	FY03	FY04	FY05	FY06	FY07	FY08
OFFICER	0	0	0	0	0	0
ENLISTED	0	0	0	0	0	0
CIVILIAN	0	0	0	0	0	0

If Applicable

IMPACTS:

- Degradation of Emergency Response capabilities
- Inability to meet Family Advocacy IM/IT equipment requirements for Family Maltreatment Case Management
- Radiology Transcription equipment degradation/failure at MacDill AFB
- Reduced IT Services at 3 large MTFs
- Larger out year bills due to partial program funding this FY

POC: Maj Eric Huweart

Background for AMC IM/IT Unfunded

- **Laptops - $32,528**
- **Printers - $7,500**
- **Projectors - $14,400**
- **Communications equipment (LMRs, Spare Phones) - $210,680**
- **Radiology Transcription Equipment - $ 240,000**
- **Contract Support - $ 371,700**
  - **Helpdesk Technician (MacDill, Travis) - 134,700**
  - **Web Administration (Travis) – 83,500**
  - **Database Support (Andrews) – 30,000**
  - **Network Support (Travis) – 63,500**
  - **Computer Support (Andrews) – 20,000**
  - **Cable Support – (Andrews) – 40,000**

FY04 AETC IM/IT Program

BACKGROUND:

The program provides the maintenance and sustainment for connectivity, storage, and innovative tools for support clinical and business operations in the command. This includes end-to-end IT operations for data, video, and voice. There is an increasing demand and reliance on these operations coupled with IM/IT funding used as offsets for must pay bills. FY04 funding program covered a portion of the basic desktop/printing requirements.

ADJUSTMENT:

The adjustment is for $4.7M UFRs in FY04 in IT Commodities...extending beyond the basic desktop needs.

FUNDING ($M):	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
CURRENT PROGRAM	3.881	5.170	5.247	5.326	5.406	5.487
ADJUSTMENT	4.7	0.0	0.0	0.0	0.0	0.0
REVISED PGM TOTAL	8.581	0.0	0.0	0.0	0.0	0.0

PEC

PROCUREMENT	FY03	FY04	FY05	FY06	FY07	FY08
Item 1						
Item 2						

If Applicable

MANPOWER	FY03	FY04	FY05	FY06	FY07	FY08
OFFICER	0	0	0	0	0	0
ENLISTED	0	0	0	0	0	0
CIVILIAN	0	0	0	0	0	0

If Applicable

IMPACTS:

- Reduced Keesler clinical capability to execute regional/agency MOU requirements for medical data storage
- Reduced WMHC capability to serve as host for TRO/San Antonio area wide informatics operations; affecting inpatient/outpatient storage & retrieval requirements; no ability to maximize mobile computing in clinical areas
- Create a command-wide deficiency in IT training/course materials in maintaining necessary proficiency for tools
- No replacement for aged video/voice conferencing capabilities; prone to outages affecting patient/business process
- No technology refresh for backend ops (server & backup solutions); medical data not

POC: Maj Tee Williford/DSN 487-684

Backup Slide
AETC IM/ITFY04 UFR

- Upgrades for storage area network at WHMC & Keesler
  - Data storage & server management tools for disaster recovery
  - WHMC - $840k & Keesler - $680k
- Basic Server replacements for smaller sites
  - 10 Sites - $970k
- VTC/AV upgrades
  - GME teaching tools (whiteboards, projectors, etc.,)
    - All Sites $500k
- WHMC in-house nurse call/code transmitter – hardware nodes must replaced, no longer supported - $150k
- Server Software and Licensing (Windows, Symantec Ghost, etc.) - $90k
- IT Training Course material (Simulators) & Software Tools - $300k
- Clinical Handheld Computing devices (Tablets & PDAs) for Inpatient & Outpatient Settings - $800k (WHMC, Keesler, & Luke)
- Communications Equipment - $220k
- Media Development Tools for Schoolhouse - $150k

FY04 USAFE Flight of the Future plus IMIT program

BACKGROUND:

USAFE has been the lead Command for the Flight of the Future test project. FoF provides a central help desk and IMIT support and returns 4A0s to other administrative functions. This program was centrally funded for the FY03/FY04 test. USAFE has ensured funding is available in the USAFE program for FY06 and throughout the FYDP. Information provided to USAFE indicated SGR intended to fully fund the bridge in FY05.

ADJUSTMENT:

The adjustment of $1.76M is necessary to provide for bridging the program from the FY04 test year to FY06 when it is fully funded in USAFE's financial program.

FUNDING ($M): PEC 87781F	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
CURRENT PROGRAM	4.162	4.767	7.003	7.051	7.057	7.105
ADJUSTMENT	1.76	0.0	0.0	0.0	0.0	0.0
REVISED PGM TOTAL	5.922	4.767	7.003	7.051	7.057	7.105

PROCUREMENT	FY03	FY04	FY05	FY06	FY07	FY08
Item 1						
Item 2						

If Applicable

MANPOWER	FY03	FY04	FY05	FY06	FY07	FY08
OFFICER	0	0	0	0	0	0
ENLISTED	26	26	26	0	0	0
CIVILIAN	0	0	0	0	0	0

If Applicable

IMPACTS:

- Gross adjustment is $1.76M, NET ADJUSTMENT IS $500K
  - - Source of funds: $800K from SGR, $460K from USAFE program, $500K direct fund of UFR or from fully funded Foreign Currency Fluctuation (FCF) UFR
- If unfunded, USAFE will incur a 4-6 month negative impact due to the required ramp-up in IMIT support to re-establish trained enlisted support. Inefficiencies will result in increased out year costs.

POC: Maj Duane Bragg/DSN 480-697

Telephony Upgrade & Modernization (TELMOD)

BACKGROUND: Replaces aging telephony infrastructure at sites identified as critical via a engineering assessment of risk and criticality and assignment of ratings. The tolerance threshold for risk was established at ratings of 40 and up. Sites with this rating are deemed to be exigent replacement requirements. The assessments are updated at least annually and address age and condition of equipment, evolution of technology, changes in standards, and changes in market forces (vendor and/or item obsolescence/support).

ADJUSTMENT: Buy down all sites at or above risk tolerance threshold IAW current risk/criticality engineering assessment. Restore 1.8M in funds lent to TELMOD program by CITS Program this FY. Avoids impact to Medical Equipment and MSIM in FY05 which were slated to pay back CITS a total of $1.4M & $.4M respectively IAW the Corporate Structure approved plan to support Telephony this year in the absence of additional funding.

$M:	FY04	FY05	FY06	FY07	FY08	FY09	FY10	FY11
CURRENT PRG	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
ADJUSTMENT	$ 5.6							
REV PGM	$ 5.6	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL								

IMPACTS:

- Critical telephony infrastructure issues create a high risk of catastrophic failures that will cause major mission impacts (disruption and interruption of service), and will have to be fixed at a premium price in haste
- Addresses significant shortfalls at sites already at capacity cannot meet mission rqmts with existing infrastructure
- Addresses sites which have telephony equipment that does not meet DoD certification standards.
- Reduces additional risks to MSIM and Medical Equipment program which must restore funding lent by the CITS Program to TELMOD under the previously approved borrowing and lending plan. Reduces risk of Medical Investment Equipment refresh rates extending well beyond useful life-expectancy and slippage in Network cable plant/electronics refresh rates that can drive increases in work stoppages due to UPW failure and Load/Density saturation

Meeting Recap & Calendar

- **New Items**
- **Action Items**
- **Meeting Schedule:**
  - **AFMS Group: Wed, 18 Aug, 1300-1530**